

# NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION  
No. 2:12-md-02323 (E.D. Pa.)

## NOTICE, CONSENT, AND REFERENCE OF AN ATTORNEY'S LIEN DISPUTE TO A MAGISTRATE JUDGE FOR A FINAL DECISION

### I. PARTIES TO THE DISPUTE

Dispute:	Robert Harris v. Podhurst Orseck, P.A.; Neurocognitive Football Lawyers, PLLC
Lien ID:	00010; 01667

### II. NOTICE OF A MAGISTRATE JUDGE'S AVAILABILITY

A United States Magistrate Judge of this Court is available to conduct all proceedings and enter a final decision dispositive of each Dispute. A Magistrate Judge may exercise this authority to resolve a Dispute over an Attorney's Lien only if all Parties voluntarily consent.

### III. CONSENT

Both Parties to the Dispute may consent to have the Dispute referred to a Magistrate Judge for entry of a final decision, or either Party may withhold consent without adverse substantive consequences. The name of any Party withholding consent will not be revealed to a Magistrate Judge who may otherwise be involved with your Dispute.

If either Party does not consent to have the Dispute referred to a Magistrate Judge for final disposition, the District Judge will enter a final decision resolving the Dispute after consideration of the Report and Recommendation from the Magistrate Judge and any objections from the Parties.

### IV. HOW TO SERVE THIS CONSENT ON THE CLAIMS ADMINISTRATOR

If you wish to consent to have the Magistrate Judge enter a final order as to the resolution of this Attorney's Lien Dispute, send the signed form to the Claims Administrator in one of these ways:

By Email:	ClaimsAdministrator@NFLConcussionSettlement.com
By Facsimile:	(804) 521-7299, ATTN: NFL Liens
By Mail:	NFL Concussion Settlement Claims Administrator P.O. Box 25369 Richmond, VA 23260 ATTN: NFL Liens
By Delivery:	NFL Concussion Settlement c/o BrownGreer PLC 250 Rocketts Way Richmond, VA 23231 ATTN: NFL Liens

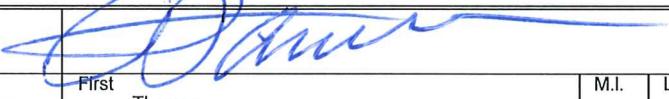
#### V. HOW TO CONTACT US WITH QUESTIONS OR FOR HELP

If you are represented by a lawyer, consult with your lawyer if you have questions or need assistance. If you are unrepresented and have any questions about this Notice or need help, contact us at 1-855-887-3485 or send an email to ClaimsAdministrator@NFLConcussionSettlement.com. If you are a lawyer, call or email your designated Firm Contact for assistance. For more information about the Settlement Program, visit the official website at www.NFLConcussionSettlement.com where you can read or download the Rules Governing Attorneys' Liens, Frequently Asked Questions, and the complete Settlement Agreement.

#### VI. CERTIFICATION

Both the Settlement Class Member or his or her attorney, if represented, and attorney lienholder must submit a signed copy of this form to the Claims Administrator to allow a Magistrate Judge to enter a final order resolving the Dispute. The statement may be signed by a current attorney on behalf of the Settlement Class Member. The signature may be an original wet ink signature, a PDF or other electronic image of an actual signature, or an electronic signature.

**By signing below, the following Party consents to have a United States Magistrate Judge conduct any and all proceedings and enter a final decision as to the Notice of Attorney's Lien (ECF No.7064 and 11066).**

Signature			Date	11/15/22
Printed Name	First Thomas	M.I.	Last	Parnell
Law Firm	Neurocognitive Football Lawyers, PLLC			

# NFL CONCUSSION SETTLEMENT

IN RE: NATIONAL FOOTBALL LEAGUE PLAYERS' CONCUSSION INJURY LITIGATION  
No. 2:12-md-02323 (E.D. Pa.)

## WITHDRAWAL OF ATTORNEY'S LIEN DISPUTE

This Withdrawal Form ("Withdrawal") must be submitted to the Claims Administrator if the Parties to an Attorney's Lien Dispute reach an agreement resolving the Dispute at any time before the Magistrate Judge issues a Report and Recommendation or a final decision. Each Party to a Dispute must submit a Withdrawal that includes:

1. The agreed amount or percentage allocation of the Monetary Award funds withheld for attorneys' fees to be paid to each Party;
2. Any costs of the current attorney as reflected in the Statement of Fees and Costs with an itemized list of those costs including a brief explanation of the purpose of incurring the costs and the date the costs were incurred;
3. Any costs of the attorney lienholder(s) as set forth in the Lien assertion(s) with an itemized list of those costs including a brief explanation of the purpose of incurring the costs and the date the costs were incurred;
4. The allocation of a refund, if any, of the 5% deduction for Common Benefit Fees among the Parties.

The Withdrawal must be approved by the Court.

### I. SETTLEMENT CLASS MEMBER INFORMATION

Name	First Robert	M.I. L	Last Harris
Settlement Class Member Type	Retired NFL Player		
Primary Counsel in the Settlement Program	Caroline V. Davis, Esq., Law Offices of Caroline V. Davis, PC		
Address	Street 100 West Franklin Street		
	City Richmond	State VA	Zip 23220
Email Address	cdavis@dhdgclaw.com		

### II. ATTORNEY LIENHOLDER INFORMATION (#1)

Name	Full Name or Law Firm Name Podhurst Orsek, PA		
Address	Street One SE 3rd Ave		
	City Miami	State FL	Zip 33131
Email Address			

<b>III. ATTORNEY LIENHOLDER INFORMATION (#2) (IF APPLICABLE)</b>			
<b>Name</b>	Full Name or Law Firm Name Neurocognitive Football Lawyers, PLLC		
<b>Address</b>	Street 722 E Fletcher Avenue		
	City Tampa	State FL	Zip 33612
<b>Email Address</b>	tomparnell5@aol.com		
<b>IV. SUMMARY OF DISPUTE RESOLUTION</b>			
The Parties to the Dispute must complete the boxes below to reflect the amounts to be distributed to the Settlement Class Member or his or her attorney (if represented) and to the Attorney Lienholder(s). The total fees cannot exceed the Presumptive Fee Cap unless the Court granted a Petition for Deviation.			
<b>A. ATTORNEYS' FEES AND COSTS</b>			
<b>1.</b> <b>To be Paid to Attorney Lienholder #1</b>	<b>Amount or Percentage of Fees</b>	<b>Amount of Reasonable Costs**</b>	
	0	0	
<b>2.</b> <b>To be Paid to Attorney Lienholder #2</b>	<b>Amount or Percentage of Fees</b>	<b>Amount of Reasonable Costs**</b>	
	0	0	
<b>3.</b> <b>To be Paid to Settlement Class Member or his or her Attorney Identified in Section I</b>	<b>Amount or Percentage of Fees</b>	<b>Amount of Reasonable Costs**</b>	
	100	\$10,700	
<b>** Costs for the current attorney or Attorney Lienholder(s) must have been provided to the Claims Administrator in the Statement of Fees and Costs and the Lien assertion(s), respectively. Each attorney must attach to this Withdrawal an itemized list of costs with a brief description of each cost and the date each cost was incurred.</b>			

**B. COMMON BENEFIT FEE REFUND**

The Claims Administrator is obligated to pay 5% of all Awards into the Attorneys' Fees Qualified Settlement Fund pending further order of the Court. Explain how the Parties wish to distribute those funds or a portion thereof, if they are refunded by the Court at a future date.

1.	<b>Agreed Percentage of any Refund of the 5% Deduction for Common Benefit Fees to be Paid to Attorney Lienholder #1</b>	0
2.	<b>Agreed Percentage of any Refund of the 5% Deduction for Common Benefit Fees to be Paid to Attorney Lienholder #2</b>	0
3.	<b>Agreed Percentage of any Refund of the 5% Deduction for Common Benefit Fees to be Paid to Settlement Class Member</b>	0
4.	<b>Agreed Percentage of any Refund of the 5% Deduction for Common Benefit Fees to be Paid to Settlement Class Member's Attorney Identified in Section I</b>	100%

Note: It is understood that the Claims Administrator will pay the Parties these amounts according to the provisions of the Settlement Agreement and Court orders regarding settlement implementation.

**V. HOW TO SERVE THIS WITHDRAWAL ON THE CLAIMS ADMINISTRATOR**

<b>By Email</b>	ClaimsAdministrator@NFLConcussionSettlement.com
<b>By Facsimile</b>	(804) 521-7299; ATTN: NFL Liens
<b>By Mail</b>	NFL Concussion Settlement Claims Administrator P.O. Box 25369 Richmond, VA 23260 ATTN: NFL Liens
<b>By Delivery</b>	NFL Concussion Settlement c/o BrownGreer PLC 250 Rocketts Way Richmond, VA 23231 ATTN: NFL Liens

## VI. HOW TO CONTACT US WITH QUESTIONS OR FOR HELP

**Settlement Class Member:** If you are represented by a lawyer, consult with your lawyer if you have questions or need assistance. If you are unrepresented and have any questions or need help, contact us at 1-855-887-3485 or send an email to [ClaimsAdministrator@NFLConcussionSettlement.com](mailto:ClaimsAdministrator@NFLConcussionSettlement.com). If you are a lawyer, call or email your designated Firm Contact for assistance. For more information about the Settlement Program, visit the official website at [www.NFLConcussionSettlement.com](http://www.NFLConcussionSettlement.com) to read the Frequently Asked Questions or download a copy of the complete Settlement Agreement.

**Lienholder:** Contact us at 1-855-877-3485 or email [ClaimsAdministrator@NFLConcussionSettlement.com](mailto:ClaimsAdministrator@NFLConcussionSettlement.com). For more information about the Settlement Program, visit the official website at [www.NFLConcussionSettlement.com](http://www.NFLConcussionSettlement.com) to read the Frequently Asked Questions or download a copy of the complete Settlement Agreement.

## VII. SIGNATURE

Both the Settlement Class Member or his or her attorney, if represented, and Attorney Lienholder(s) must submit a signed copy of this Withdrawal to the Claims Administrator. By signing this Withdrawal, each Party certifies the following:

I declare under penalty of perjury pursuant to 28 U.S.C. § 1746 that the information provided in this Withdrawal is true and accurate to the best of my knowledge and that I understand that false statements made in connection with this process may result in fines, sanctions, and/or other remedy available by law.

I certify that I have/will serve a copy of this signed Withdrawal on the Claims Administrator.

By submitting this Withdrawal, I consent to the payment of the withheld funds according to the terms in Section IV.

Signature			Date	
Printed Name	First Thomas	Middle Initial	Last Parnell	
Law Firm	Neurocognitive Football Lawyers, PLLC			